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CONFIRMATION NO. 6133

|  |   |                               |   |  |                                |
|--|---|-------------------------------|---|--|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/649,214   | <b>FILING OR 371(c) DATE</b><br>08/26/2003<br><b>RULE</b>   | <b>CLASS</b><br>600           | <b>GROUP ART UNIT</b><br>3737   | <b>ATTORNEY DOCKET NO.</b><br>5074A-000001/COB |                                |
| <b>APPLICANTS</b><br>Bradley Jascob, Broomfield, CO;<br>David Simon, Boulder, CO;<br>Paul Kessman, Boulder, CO;<br>Aaron Smith, Denver, CO;  |   |                               |   |  |                                |
| <b>** CONTINUING DATA *****</b><br>This application is a CON of 09/873,604 06/04/2001 PAT 6,636,757  |   |                               |   |  |                                |
| <b>** FOREIGN APPLICATIONS *****</b>   |   |                               |   |  |                                |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 11/17/2003</b>   |   |                               |   |  |                                |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged _____<br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>CO | <b>SHEETS DRAWING</b><br>10   | <b>TOTAL CLAIMS</b><br>50                      | <b>INDEPENDENT CLAIMS</b><br>4 |
| <b>ADDRESS</b><br>27572  |   |                               |   |  |                                |
| <b>TITLE</b><br>Method and apparatus for electromagnetic navigation of a surgical probe near a metal object  |   |                               |   |  |                                |
| <b>FILING FEE RECEIVED</b><br>1374   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |                                |